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Atty. Docket: REISNER=5

Combined Declaration for Patent Application and Power of Attorney

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and that I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

HUMAN MONOCLONAL ANTIBODIES TO THE HEPATITIS B SURFACE ANTIGEN

the specification of which (check one)

☐ is attached hereto;☐ was filed in the United States under 35 U.S.C. §111 on _____, as
USSN _____; or☒ was/will be filed in the U.S. under 35 U.S.C. §371 by entry into the U.S. national stage of
an international (PCT) application, PCT/IL97/00184; filed 10 June 1997,
entry requested on _____; national stage application received
USSN _____; §371/§102(e) date _____ (*if known),and was amended on 25 June 1998 (if applicable).

(include dates of amendments under PCT Art. 19 and 34 if PCT)

I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above; and I acknowledge the duty to disclose to the Patent and Trademark Office (PTO) all information known by me to be material to patentability as defined in 37 C.F.R. § 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §§ 119, 365 of any prior foreign application(s) for patent or inventor's certificate, or prior PCT application(s) designating a country other than the U.S., listed below with the "Yes" box checked and have also identified below any such application having a filing date before that of the application on which priority is claimed:

<u>118625</u> (Number)	<u>Israel</u> (Country)	<u>25 June 1998</u> (Day Month Year Filed)	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
_____ (Number)	_____ (Country)	_____ (Day Month Year Filed)	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby claim the benefit under 35 U.S.C. § 120 of any prior U.S. non-provisional Application(s) or prior PCT Application(s) designating the U.S. listed below, or under § 119(e) of any prior U.S. provisional applications listed below, and, insofar as the subject matter of each of the claims of this application is not disclosed in such U.S. or PCT application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the PTO all information as defined in 37 C.F.R. §1.56(a) which occurred between the filing date of the prior application and the national filing date of this application:

_____ (Application Serial No.)	_____ (Day Month Year Filed)	_____ (Status: patented, pending, abandoned)
_____ (Application Serial No.)	_____ (Day Month Year Filed)	_____ (Status: patented, pending, abandoned)
_____ (Application Serial No.)	_____ (Day Month Year Filed)	_____ (Status: patented, pending, abandoned)

I hereby appoint the following attorneys, with full power of substitution, association, and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SHERIDAN NEIMARK, REG. NO. 20,520 - ROGER L. BROWDY, REG. NO. 25,618 - ANNE M. KORNBAU, REG. NO. 25,884
NORMAN J. LATKER, REG. NO. 19,963 - IVER P. COOPER, REG. NO. 28,005 - ALLEN C. YUN, REG. NO. 37,921
NICK S. BRODER, REG. NO. 33,478 - * Patent Agent

ADDRESS ALL CORRESPONDENCE TO
BROWDY AND NEIMARK, P.L.L.C.
419 Seventh Street, N.W.
Washington, D.C. 20004

DIRECT ALL TELEPHONE CALLS TO:
BROWDY AND NEIMARK
(202) 628-5197

The undersigned hereby authorizes the U.S. Attorneys or Agents named herein to accept and follow instructions from XTL BIOPHARMACEUTICALS LIMITED as to any action to be taken in the U.S. Patent and Trademark Office regarding this application without direct communication between the U.S. Attorney or Agent and the undersigned. In the event of a change of the persons from whom instructions may be taken, the U.S. Attorneys or Agents named herein will be so notified by the undersigned.

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Atty.Docket: REISNER=5

Title:

U.S. Application filed _____, Serial No. _____
PCT Application filed 119 June 1997, Serial No. PCT/IL97/00184

I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. §1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF FIRST INVENTOR <u>Yair REISNER</u>		INVENTOR'S SIGNATURE <u>Y. Reisner</u>	DATE <u>16/11/98</u>
RESIDENCE <u>Old Jaffa, Israel</u>		CITIZENSHIP <u>Israel</u>	
POST OFFICE ADDRESS <u>Mazal Kashat 4, 68037 Old Jaffa, Israel</u>			
FULL NAME OF SECOND JOINT INVENTOR <u>Shlomo DAGAN</u>		INVENTOR'S SIGNATURE <u>ISX</u>	DATE <u>Nov 16 1998</u>
RESIDENCE <u>Rehovot, Israel</u>		CITIZENSHIP <u>Israel</u>	
POST OFFICE ADDRESS <u>Bustenai 12, 76289 Rehovot, Israel</u>			
FULL NAME OF THIRD JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF FOURTH JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF FIFTH JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF SIXTH JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
FULL NAME OF SEVENTH JOINT INVENTOR		INVENTOR'S SIGNATURE	DATE
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			

ALL INVENTORS MUST REVIEW APPLICATION AND DECLARATION BEFORE SIGNING. ALL ALTERATIONS MUST BE DETAILED AND DATED BY ALL INVENTORS PRIOR TO EXECUTION. NO ALTERATIONS CAN BE MADE AFTER THE DECLARATION IS SIGNED. ALL PAGES OF DECLARATION MUST BE SEEN BY ALL INVENTORS.

Applicant or Patentee: Yair REISNER et al. Attorney's Docket No.: REISNER-5
Appln. or Patent No.: _____ Filed or Issued: _____
For: HUMAN MONOCLONAL ANTIBODIES TO THE HEPATITIS B SURFACE ANTIGEN

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL BUSINESS ENTITY STATUS
(37 CFR 1.9(f) and 1.27(c)) - SMALL BUSINESS CONCERN

I hereby declare that I am
☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of the concern identified below:

NAME OF SMALL BUSINESS CONCERN YEDA RESEARCH AND DEVELOPMENT CO. LTD.
ADDRESS OF SMALL BUSINESS CONCERN P.O. Box 95, Rehovot 76100, Israel

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention entitled HUMAN MONOCLONAL ANTIBODIES TO THE HEPATITIS B SURFACE ANTIGEN by inventors Yair REISNER and Shlomo DAGAN, described in:

☐ the specification filed herewith with title listed as above.
☒ application no. _____, filed _____
☐ patent no. _____, issued _____

If the rights held by the above-identified small business concern are not exclusive, each individual, concern or organization having rights in the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

*Note: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities (37 CFR 1.27).

NAME XTL BIOPHARMACEUTICALS LIMITED
ADDRESS Kiryat Weizmann, P.O. Box 370, Rehovot 76100, Israel
☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION
NAME _____
ADDRESS _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING PAULINA BEN-AMI
TITLE OF PERSON SIGNING OTHER THAN OWNER VICE PRESIDENT
ADDRESS OF PERSON SIGNING Yeda Research and Development Co. Ltd. P.O. Box 95, Rehovot 76100 I
SIGNATURE Paulina Ben-Ami DATE December 10, 1998

Applicant or Patentee: Yair REISNER et al. Attorney's Docket No.: REISNER-5
Appl. or Patent No.: _____ Filed or Issued: _____
For: HUMAN MONOCLONAL ANTIBODIES TO THE HEPATITIS B SURFACE ANTIGEN

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☐ the owner of the small business concern identified below:
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ADDRESS OF SMALL BUSINESS CONCERN Kiryat Weizmann, P.O. Box 370, Rehovot 76100, Israel

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☐ the specification filed herewith with title listed as above.
☒ application no. _____, filed _____
☐ patent no. _____, issued _____

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*Note: Separate verified statements are required from each named person, concern or organization having rights to the invention overruling to their status as small entities (37 CFR 1.27).

NAME YEDA RESEARCH AND DEVELOPMENT CO. LTD.
ADDRESS P.O. Box 95, Rehovot 76100, Israel
☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION
NAME _____
ADDRESS _____
☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Mirit Lotan
TITLE OF PERSON SIGNING OTHER THAN OWNER PATENT ATTORNEY
ADDRESS OF PERSON SIGNING XTL BIOPHARMACEUTICALS LIMITED, Kiryat Weizmann, P.O. Box 370 Rehovot 76100 Israel
SIGNATURE Mirit Lotan DATE December 10, 1998